

Fill in this information to identify your case:

Debtor 1 Kimyutta M. Carroll
 First Name Middle Name Last Name

Debtor 2 _____
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Pennsylvania

Case number 24-14222
 (if known)

☒ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☒ No. Go to Part 2.
☐ Yes.

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

			Total claim
4.1	Capital One	Last 4 digits of account number <u>0 7 4 5</u>	\$644.00
Nonpriority Creditor's Name		When was the debt incurred?	
<u>Attn: Bankruptcy</u>		<u>1/1/2019</u>	
<u>PO Box 30285</u>		As of the date you file, the claim is: Check all that apply.	
Number	Street	<input type="checkbox"/> Contingent	
<u>Salt Lake City, UT 84130-0285</u>		<input type="checkbox"/> Unliquidated	
City	State	ZIP Code	
		<input type="checkbox"/> Disputed	
Who incurred the debt? Check one.		Type of NONPRIORITY unsecured claim:	
<input checked="" type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Student loans	
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
<input type="checkbox"/> At least one of the debtors and another		<input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			

Debtor 1 Kimyutta M. Carroll Case number (if known) 24-14222
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.2 Capital One Last 4 digits of account number 3 0 4 8 **\$551.00**

Nonpriority Creditor's Name

Attn: Bankruptcy

PO Box 30285

Number Street

Salt Lake City, UT 84130-0285

City State ZIP Code

When was the debt incurred?

1/1/2020

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify CreditCard

Is the claim subject to offset?

☒ No

☐ Yes

4.3 CFNA Last 4 digits of account number 5 3 4 5 **\$295.00**

Nonpriority Creditor's Name

Attn: Bankruptcy

PO Box 81315

Number Street

Cleveland, OH 44181-0315

City State ZIP Code

When was the debt incurred?

7/1/2020

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify ChargeAccount

Is the claim subject to offset?

☒ No

☐ Yes

Debtor 1

Kimyutta

M.

Carroll

Case number (if known) **24-14222**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.4 **Diverse Funding** Last 4 digits of account number **3 9 3 1** **\$1,377.00**

Nonpriority Creditor's Name

Attn: Bankruptcy Attn: Bankruptcy

2351 North Forest Road , Suite 110

Number Street

Getzelle, NY 14068

City State ZIP Code

When was the debt incurred?

4/1/2024

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **UnknownLoanType**

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

4.5 **Fst Premier** Last 4 digits of account number **5 7 5 3** **\$442.00**

Nonpriority Creditor's Name

3820 N Louise Ave

Number Street

Sioux Falls, SD 57107

City State ZIP Code

When was the debt incurred?

5/1/2024

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **CreditCard**

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Debtor 1

Kimyutta**M.****Carroll**Case number (if known) **24-14222**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.6	Genesis FS Card Services	Last 4 digits of account number 5 3 5 6	\$1,713.00
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Nonpriority Creditor's Name

Attn: Bankruptcy**PO Box 4477**

Number Street

Beaverton, OR 97076

City State ZIP Code

When was the debt incurred?

4/1/2024

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **CreditCard**

Is the claim subject to offset?

☒ No☐ Yes

4.7	Lvnv Funding/Resurgent Capital	Last 4 digits of account number 1 4 0 8	\$1,100.00
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Nonpriority Creditor's Name

Attn: Bankruptcy**PO Box 10497**

Number Street

Greenville, SC 29603

City State ZIP Code

When was the debt incurred?

2/1/2024

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **FactoringCompanyAccount**

Is the claim subject to offset?

☒ No☐ Yes

Debtor 1

Kimyutta**M.****Carroll**Case number (if known) **24-14222**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.8	Merrick Bank/Card Works	Last 4 digits of account number <u>8 7 7 8</u>	\$2,603.00
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Nonpriority Creditor's Name

Attn: Bankruptcy**P.O. Box 5000**

Number Street

Draper, UT 84020-5000

City State ZIP Code

When was the debt incurred? 5/1/2021

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify CreditCard

Is the claim subject to offset?

☒ No☐ Yes

4.9	Nelnet	Last 4 digits of account number <u>1 0 8 7</u>	\$23,818.00
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Nonpriority Creditor's Name

Attn: Bankruptcy**121 S 13th St**

Number Street

Lincoln, NE 68508-1904

City State ZIP Code

When was the debt incurred? 6/1/2019

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify _____

Is the claim subject to offset?

☒ No☐ Yes

Debtor 1

Kimyutta**M.****Carroll**Case number (if known) **24-14222**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.10	Nelnet	Last 4 digits of account number	<u>0 7 8 7</u>	\$10,924.00
Nonpriority Creditor's Name		When was the debt incurred? <u>2/1/2022</u>		
Attn: Bankruptcy				
121 S 13th St		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent		
Lincoln, NE 68508-1904		<input type="checkbox"/> Unliquidated		
City	State	ZIP Code	<input type="checkbox"/> Disputed	
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
4.11	Nelnet	Last 4 digits of account number	<u>0 4 8 7</u>	\$6,178.00
Nonpriority Creditor's Name		When was the debt incurred? <u>10/1/2020</u>		
Attn: Bankruptcy				
121 S 13th St		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent		
Lincoln, NE 68508-1904		<input type="checkbox"/> Unliquidated		
City	State	ZIP Code	<input type="checkbox"/> Disputed	
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Debtor 1 Kimyutta M. Carroll Case number (if known) 24-14222
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.				Total claim
4.12	Nelnet Nonpriority Creditor's Name Attn: Bankruptcy 121 S 13th St Number Street Lincoln, NE 68508-1904 City State ZIP Code	Last 4 digits of account number <u>0 6 8 7</u> When was the debt incurred? <u>6/1/2021</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,178.00
4.13	Nelnet Nonpriority Creditor's Name Attn: Bankruptcy 121 S 13th St Number Street Lincoln, NE 68508-1904 City State ZIP Code	Last 4 digits of account number <u>0 9 8 7</u> When was the debt incurred? <u>10/1/2022</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,989.00

Debtor 1

Kimyutta**M.****Carroll**Case number (if known) **24-14222**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.14	Nelnet	Last 4 digits of account number 0 5 8 7	\$4,575.00
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Nonpriority Creditor's Name

Attn: Bankruptcy

When was the debt incurred?

6/1/2021**121 S 13th St**

As of the date you file, the claim is: Check all that apply.

Number Street

☐ Contingent**Lincoln, NE 68508-1904**☐ Unliquidated

City State ZIP Code

☐ Disputed

Who incurred the debt? Check one.

Type of NONPRIORITY unsecured claim:

☒ Debtor 1 only☒ Student loans☐ Debtor 2 only☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debtor 1 and Debtor 2 only☐ Debts to pension or profit-sharing plans, and other similar debts☐ At least one of the debtors and another☐ Other. Specify _____☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

4.15	Nelnet	Last 4 digits of account number 0 3 8 7	\$3,558.00
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Nonpriority Creditor's Name

Attn: Bankruptcy

When was the debt incurred?

10/1/2020**121 S 13th St**

As of the date you file, the claim is: Check all that apply.

Number Street

☐ Contingent**Lincoln, NE 68508-1904**☐ Unliquidated

City State ZIP Code

☐ Disputed

Who incurred the debt? Check one.

Type of NONPRIORITY unsecured claim:

☒ Debtor 1 only☒ Student loans☐ Debtor 2 only☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debtor 1 and Debtor 2 only☐ Debts to pension or profit-sharing plans, and other similar debts☐ At least one of the debtors and another☐ Other. Specify _____☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Debtor 1 Kimyutta M. Carroll Case number (if known) 24-14222
First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.			Total claim
4.16	Nelnet Nonpriority Creditor's Name Attn: Bankruptcy 121 S 13th St Number Street Lincoln, NE 68508-1904 City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>0 8 8 7</u> When was the debt incurred? <u>10/1/2022</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	\$2,386.00
4.17	Syncb/zulily Nonpriority Creditor's Name Attn: Bankruptcy PO Box 965060 Number Street Orlando, FL 32896-5060 City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>7 8 6 8</u> When was the debt incurred? <u>12/1/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>	\$697.00

Debtor 1 Kimyutta M. Carroll Case number (if known) 24-14222
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.				Total claim
4.18	U.S. Small Business Admin.	Last 4 digits of account number	<u>9</u> <u>1</u> <u>0</u> <u>4</u>	\$18,563.00
Nonpriority Creditor's Name		When was the debt incurred? _____		
Office of General Counsel				
409 3rd St SW		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Washington, DC 20416-0011				
City	State	ZIP Code		
Who incurred the debt? Check one.		Type of NONPRIORITY unsecured claim:		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____		
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1

Kimyutta**M.****Carroll**Case number (if known) **24-14222**

First Name

Middle Name

Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a. <u>\$0.00</u>
	6b.	Taxes and certain other debts you owe the government	6b. <u>\$0.00</u>
	6c.	Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
	6e.	Total. Add lines 6a through 6d.	6e. <u>\$0.00</u>

			Total claim
Total claims from Part 2	6f.	Student loans	6f. <u>\$63,606.00</u>
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$27,985.00</u>
	6j.	Total. Add lines 6f through 6i.	6j. <u>\$91,591.00</u>

Fill in this information to identify your case:

Debtor 1	<u>Kimyutta</u>	<u>M.</u>	<u>Carroll</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern District of Pennsylvania</u>		
Case number (if known)	<u>24-14222</u>		

☒ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?



No



Yes. Name of person _____

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)*.

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X

/s/ Kimyutta M. Carroll

Kimyutta M. Carroll, Debtor 1

Date 12/04/2024

MM/ DD/ YYYY